
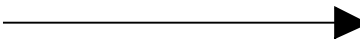


United States Postal Service

Postage Statement —Library Mail and
Special Standard Mail — Permit Imprint

MAILER: Complete all items by typewriter, pen, or indelible pencil. If you need a receipt, prepare in duplicate.

Mailer Information	Post Office of Mailing		Mailing Date		Processing Category (DMM C050)		USPS Authorized Mailing ID Code(s)	
	Permit No.	Federal Agency Cost Code	Statement Sequence No.		<input type="checkbox"/> Flats <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels <input type="checkbox"/> Outside Parcels			
	Permit Holder's Name and Address (Include ZIP Code)		Telephone		Receipt No.			
	Container Quantities (Fill in all that apply)							
	1-Ft. MM Trays <u>N/A</u> 2-Ft. MM Trays <u>N/A</u> 2-Ft. EMM Trays <u>N/A</u> Total Ltr. Trays <u>N/A</u>							
	Flat Trays <u>N/A</u> Number of Sacks _____ Number of Pallets _____ Number of Other _____							
	Weight of a Single Piece _____ pounds				If Sacking, Based On <input type="checkbox"/> Piece count <input type="checkbox"/> 20 lbs. <input type="checkbox"/> 1,000 cu. in.			
Dun & Bradstreet No. _____		Total Pieces		Total Weight				
CTAS Cust. Ref. ID _____								
Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)		Name and Address of Mailing Agent (If other than permit holder)						
Dun & Bradstreet No. _____		Dun & Bradstreet No. _____						
Postage Computation	<input type="checkbox"/> For Special Standard Mail (DMM E624 and E634), go to Part A on the reverse of this form.				Postage (From reverse side) 	Part A	\$	
	<input type="checkbox"/> For Library Mail (DMM E625), go to Part B on the reverse of this form.					Part B	\$	
	Special Service (Specify)		No. Pieces	Rate/Fee Per Pc.				
			\$	X	= \$			
Total Postage 							\$	
Certification	The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and both the mailer and the agent will be liable for and agree to pay any deficiencies.)							
	The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).							
	I hereby certify that all information furnished on this form is accurate and truthful, and that the material presented qualifies for the rates of postage claimed.							
Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)						Telephone		
USPS Use Only	Single-Piece Weight _____ pounds		Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	Total Pieces		If "Yes," Reason					
	Total Weight							
	Total Postage							
	Check One <input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled		Date Mailer Notified	Contact	By (Initials)	Round Stamp (Required)		
	I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.							
Signature of Weigher				Time	AM PM			

Form 3608-R — Library Mail and Special Standard Mail — Permit Imprint

A. Special Standard Mail

Rate	Net Rate	Piece Count	Charge
Single-Piece Rate	\$	x	= \$
5-Digit Rate (<i>Presorted</i>)		x	=
BMC Rate (<i>Presorted</i>)		x	=
Total Part A (<i>Carry to front of form</i>)			\$

B. Library Mail

Category	Net Rate	Piece Count	Charge
All Pieces	\$	x	= \$
			(<i>Carry to front of form</i>)